

# **Summaries of Recommendations from reports about Homeless People in Crisis in Metropolitan Toronto, 1982-1984**

## APPENDIX A

A COMPILATION OF SUMMARIES AND RECOMMENDATIONS  
FROM REPORTS ON  
HOMELESS PEOPLE IN CRISIS IN  
METROPOLITAN TORONTO

"PUBLIC HEALTH IMPLICATIONS OF THE  
AFFORDABLE HOUSING CRISIS"

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October, 1984

## Research

1. That the Board of Health endorse the Medical Officer of Health's monitoring the impact of inadequate housing on the health of low-income Torontonians, including the homeless, so that future community health and housing policies can be targeted on the basis of health risks associated with inadequate housing. This should include an inventory of current housing information resources from the Commissioners of Housing, Buildings and Inspections, Planning and Development and the Medical Officer of Health.
2. That the Board of Health forward this report to the provincial Minister of Municipal Affairs and Housing for Ontario and the federal Minister responsible for Canada Mortgage and Housing Corporation, with a request that they increase spending for municipal non-profit and non-profit cooperative housing in their respective jurisdictions; and, similarly that the Board use future research on housing and health undertaken at its request to advocate for additional social housing spending.

## Advocacy

3. That the Board of Health endorse the following recommendations concerning income assistance from the Metro Toronto Task Force on Housing for Low-Income Single People Final Report (adopted by Metro Council March 28, 1984) and communicate its support to the Ministry of Community Services and the Metro Community Services Department.

"It is, therefore, recommended that:

"17. The Ministry of Community and Social Services increase the shelter subsidy portion of the General Welfare Assistance rate for singles living in private rental accommodation.

"18. The Ministry of Community and Social Services revise the calculation of the shelter subsidy portion of GWA rates to reflect the cost of private sector rents in large urban centres.

"19. The Ministry of Community and Social Services simplify the existing rate schedules relating to accommodation type, regardless of whether the units are self-contained or not, such that they reflect real rental costs.

"21. The Ministry of Community and Social Services increase to the equivalent of 8 hours per week at minimum wage, the amount of monthly income which GWA recipients may earn without penalty."

4. That the Board of Health endorse the recommendations of the Interdepartmental Task Force on Affordable Housing Report of November 7, 1983 (see Appendix C) and communicate its support to the Land Use Committee for relaxing the Zoning By-law to encourage intensified use of existing properties.
5. That the Board of Health endorse the (July 19, 1984) motion of the Neighbourhoods Committee to review City By-law 459-76 concerning adult-only rentals, and communicate its support of this action to City Council.
6. That the Board of Health encourage City Council to pursue a policy of liberal application of the Demolition Control By-law as a means of discouraging landlords and/or developers from unconditionally depleting the City's stock of affordable housing.

#### Planning

7. That the Board of Health request City Council to have the Medical Officer of Health or his designate represented on all interdepartmental committees and task forces, dealing with housing policies (e.g., Interdepartmental Task Force on Affordable Housing; Alternative Housing Sub-Committee of Neighbourhoods Committee, etc.).
8. That the Board of Health request the Medical Officer of Health and the Commissioner of Housing to report on potential innovative housing arrangements for senior citizens and single-parent families who are ineligible for or unable to obtain assisted housing, and to include a review of successful innovations that have been implemented elsewhere in Canada.
9. That the Board of Health request the Commissioner of Buildings and Inspections and the Medical Officer of Health to undertake a review of the Housing By-law and its enforcement and report their findings to the Board within one year.
10. That the Board of Health request the Commissioner of Planning and Development to undertake a review of definitions of boarding, lodging and rooming houses in City by-laws, with a view to amending relevant by-laws by simplifying and standardizing these definitions to facilitate development of an inspection program under the Health Protection and Promotion Act.

#### Community Development

11. That the Board of Health reaffirm the importance of community development as a preventive health strategy by endorsing the involvement of public health staff and resources in assisting community groups who wish to take an active role in solving their housing problems (e.g., provide consultation services for grant writing, promotional activities, coalition building, cooperative, non-chemical approaches to pest management, etc.).

"THE HOUSING GAP: DEFICIENCIES IN APPROPRIATE HOUSING FOR  
EX-PSYCHIATRIC PATIENTS"

Department of Public Health and Supportive Housing Coalition

May, 1982

## Summary

In May, 1982 a report was presented to the Local Board of Health which was a joint study by the Department of Public Health and the Supportive Housing Coalition. This report described the housing situation among ex-psychiatric patients, one of the largest groups of homeless individuals in the City of Toronto.

The purpose of the study was to examine the difficulties experienced by ex-psychiatric patients in obtaining appropriate housing. A variety of information gathering methods were employed, including interviews with personnel at Queen Street Mental Health Centre, Clarke Institute of Psychiatry, and psychiatric units at three general hospitals, with persons involved in locating housing for ex-psychiatric patients, general welfare assistance workers and family benefits administrators. Additionally, staff at 18 Metro hostels were surveyed and interviews were conducted with the staff of community services offering programs for ex-psychiatric patients.

Results were presented in terms of answers to eight key questions.

The study demonstrated that:

- 26% - 31% of patient discharges from the two mental health institutions had been delayed because of difficulties in finding appropriate housing in the community.
- 53% - 62% of discharged patients were assessed as requiring 24-hour supervision upon discharge.
- Specialized services for locating housing for ex-psychiatric patients reported that they could not find places for a substantial number of ex-psychiatric patients.
- 24% - 42% of discharged psychiatric patients had plans to live alone or had no plans at all.
- The survey of hostels indicated that 17% of adults in hostels on a particular day (April 6, 1982) had known psychiatric histories; 68% of persons "barred" from hostels (total 366) were so designated for psychiatric reasons.
- More than 50% of discharged patients relied on welfare as their source of income.
- There was a consensus among hospital staff interviewed that housing problems played a part in causing ex-psychiatric patients to seek readmission.

The report made several recommendations, among them that the Ministry of Health provide funding to increase the number of supportive housing beds in Toronto; that the Ministry of Health establish a mechanism for coordination of support services to ex-psychiatric patients; that Metropolitan Toronto Community Services Department and Ministry of Community and Social Services make shelter supplements mandatory for ex-psychiatric patients; that Metropolitan Toronto Community Services Department remove the residency requirement for receiving general welfare assistance; that provincial and municipal governments fund enrichment services to complement the hostel programs; that data be maintained concerning psychiatric patients' housing status from prior to discharge until appropriate housing is obtained; and that the Department of Public Health work with appropriate community groups and agencies to seek implementation of the foregoing recommendations.

"THE MORE EFFICIENT RESIDENTIAL USE OF PROPERTIES IN THE CITY,  
INCLUDING PROMOTION OF MORE AFFORDABLE HOUSING"

Interdepartmental Task Force on Affordable Housing

September, 1982

## Summary

On September 24, 1982 an Interdepartmental Task Force composed of the Commissioners of Planning and Development, Buildings and Inspections, and Housing, presented a report to the Neighbourhoods Committee of City Council on the promotion of more affordable housing in the City of Toronto.

This report focussed on the housing needs of smaller households, addressing the relationship between the *social* composition of the City, especially single adults under 65 years of age, and the *physical* composition, in particular the stock of small housing units. Exploring the economic plight of single adults at some length, the authors concluded that those under 60 are disadvantaged in terms of housing. Not only are they much more likely than families to have low incomes, they also are excluded from government housing assistance programs. Those who are able to find rental accommodation often must spend 75% or more of their meager incomes on rent.

The serious decline of rental housing stock in City of Toronto in recent years was thoroughly documented in this report. (For example, figures were presented which demonstrate that between 1979 and 1981, there was a 98% decrease in new rental units entering the private housing market. Between 1977 and 1981 average monthly rents for small housing units increased by 62% to 73%). The authors briefly described prevailing market forces that underlie the current housing shortage and concluded that it no longer pays developers to construct new small rental units or to create small units and rooms in existing houses. The authors referred to "policy context" to describe the housing responsibilities of municipal, provincial and federal governments. They pointed out that municipal involvement in housing policy is limited to land use regulations as specified by zoning by-laws. The report argued that the present Zoning By-Law in the City of Toronto is too restrictive, and recommended changes in the By-Law that would encourage intensified use of existing dwellings through conversion of single-family houses. Additionally, the authors took the position that the City should be prepared to intervene directly in the housing market by becoming a provider of affordable small housing units. This course of action would be most likely to occur if economic support was forthcoming from senior levels of government. Otherwise, additional municipal expenditures or reallocation of existing City monies would be required.



"PEOPLE WITHOUT HOMES: A PERMANENT EMERGENCY"

Social Planning Council of Metropolitan Toronto

January, 1983

## Summary

This report describes the shelter crisis in Toronto and makes the case that the problem is chronic - a permanent emergency. Among the factors underlying the emergency are exceptionally low rental vacancies, absence of new public housing construction, inadequate provincial social assistance/shelter subsidies, deconversion of multiple unit dwellings into single family units, restrictive public housing regulations and absence of adult residential facilities for special groups (e.g., ex-psychiatric patients).

The report suggests that a "coordinated set of strategies" is required to deal with the emergency, including review of municipal by-laws that restrict development of small dwelling units, review of provincial and federal policies concerning low-income housing units and rent subsidies, and removing the residency requirement for social assistance.

A case is made for improved emergency housing based on increased numbers of persons needing emergency accommodation, increased length of stays in hostels and changing profile of hostel users. The authors recommend that the role of hostels be redefined to clarify responsibilities for meeting long-term housing needs and providing support services. Several groups are identified as having distinct needs (e.g., unemployed men and women, families, homeless adolescents, ex-psychiatric patients, older adults).

Finally three issues are identified as being primary policy concerns requiring clarification and resolution: 1) role of emergency hostels; 2) access to hostels and quality of information; and 3) role of the voluntary sector.

The report concludes that provision of funds for long-term emergency services should not take the place of a publicly mandated program for planning to meet both short and long-term housing needs.

"NO PLACE TO GO, A STUDY OF HOMELESSNESS IN METROPOLITAN TORONTO:

CHARACTERISTICS, TRENDS AND POTENTIAL SOLUTIONS"

Metropolitan Toronto Assisted Housing Study,  
Metropolitan Community Services Department,  
Metropolitan Planning Department

January 1983

## Summary

This report is the first part of a larger Metropolitan Assisted Housing Study to identify the need for low-income assisted housing in Metro Toronto. The purpose of this study was to reach those with no permanent address (who would be missed by a mail-out survey which constituted the major focus of the Metro Assisted Housing Study) and identify their housing needs.

This report describes a "qualitative" study of homelessness. Interviews were conducted with staff at 24 emergency shelters, 12 social service agencies and 4 housing registries in Metro Toronto. These interviews were designed to elicit information on who clients are (i.e., demographic profile), increases and trends in homelessness and reasons for these, and suggestions for permanent housing solutions. Interviews were conducted in June 1982.

The most important findings of this study are as follows:

- In 1982, at a conservative estimate there were 3,400 homeless persons in Metro Toronto
- At the time of the survey, hostels were operating at more than full capacity with 1,556 residents for 1,529 available beds.
- Single men accounted for 77% of 1,556 hostel users; 62% of the 2,134 social service agency clients with no fixed address were single males.
- 52% of agency clients with no fixed address and 41% of hostel residents were under 25 years of age.
- Abused women and ex-psychiatric, alcohol and drug patients accounted for less than 10% each of hostel users.
- 52% of hostel users previously lived in private rental units which were lost due to eviction or rent increases; 8% originated in family homes, and the remainder came from other hostels.
- Among hostel users 87% reported either no income or receipt of public welfare.
- The largest increases in hostel client groups over the past two years were among youth, ex-psychiatric patients and unemployed, willing to work persons.

The authors concluded that the factors leading to homelessness include a decline in affordable rental stock (especially rooming houses), low rental vacancy rates, high unemployment and provincial policies on deinstitutionalizing psychiatric patients. Low-income singles are particularly vulnerable since they are not eligible for assisted housing unless they are disabled or over 60 years of age. Furthermore, existing provincial shelter allowances are not keeping pace with cost of renting in the private market. Finally, the authors took the position that permanent housing solutions must be found; for example, increasing the supply of rooming houses, bachelor apartments and boarding homes for low-income singles would reverse the trend towards hostels becoming permanent homes due to lack of affordable alternatives.

"METROPOLITAN TORONTO TASK FORCE ON  
HOUSING FOR LOW INCOME SINGLE PEOPLE:  
- - FINAL REPORT"

November, 1983

## Summary

On November 1, 1983 the Task Force on Housing for Low Income Single People presented their final report to the Metropolitan Toronto Community Services and Housing Committee.

The Task Force was established to develop concrete solutions to problems identified by the study "No Place to Go...". In addition to regular meetings to explore housing options for single people, the Task Force held public meetings in area municipalities, special meetings with representatives of the non-senior, low-income single population and interviews with experts in the field of housing, they studied housing developments existing presently to serve low-income singles, and held frequent discussions with community agencies and organizations which are working towards solutions for the crisis in affordable housing.

The target population for the Task Force was identified as "...young and middle-aged rooming house occupants for whom hostels are not appropriate...accommodation, but who are unable to afford rental accommodation in the private market...". The Task Force excluded from consideration, "...individuals who would more appropriately be accommodated in supervised residential environments such as...group homes or other...therapeutic residential environment(s)."

The target population was broken down by the Task Force into sub-groups according to group characteristics and housing needs. These sub-groups of the non-senior, low-income single population experiencing housing problems are: temporarily unemployed persons; persons displaced due to conversion, de-conversion, sale or demolition of their dwellings; persons with chronic and perpetual housing problems; transients; and youths.

The Task Force concluded that affordable housing options are severely limited for non-senior, low-income singles, and can only be expanded if senior levels of government make a commitment to address the needs of this population. Among the twenty-nine recommendations made by the Task Force were:

- that Metropolitan Council establish the position of Housing Advisor to facilitate development of affordable housing.
- that area municipalities encourage the Province to amalgamate regulations relating to building safety standards (e.g., Ontario Building Code and Ontario Fire Code).
- that area municipalities develop a standard definition of rooming, lodging and boarding houses in municipal by-laws.
- that Canada Mortgage and Housing Corporation provide additional unit allocations for non-senior, low-income single people.
- that the Ministry of Municipal Affairs and Housing provide that incentive programs for upgrading or converting rental properties be designed in such a way as to protect existing tenants.
- that the Ministry of Community and Social Services increase the shelter subsidy portion of the General Welfare Assistance (GWA) rate for singles living in private rental accommodation.
- that Metropolitan Toronto Community Services Department give homeless GWA applicants an advance entitlement to assist in obtaining accommodation, thus becoming eligible for GWA benefits.
- that the Ministry of Municipal Affairs and Housing extend the eligibility for rent-geared-to-income assistance to include low-income single people below age 60.

"METROPOLITAN TORONTO ASSISTED HOUSING STUDY, PART I:

DETERMINATION OF THE NEED FOR ASSISTED HOUSING"

Metropolitan Toronto Planning Department

April, 1983

## Summary

In June 1981 Metro Council approved a proposal for a study to estimate the need for low-income assisted housing in Metropolitan Toronto. The second part of this study to be released to date is a quantitative survey measuring need for housing assistance based on one's present housing situation.

A questionnaire was mailed to approximately 7,700 households in Metro Toronto which sought information on affordability, suitability (crowding defined as more than one person per room or two persons per bedroom), and physical adequacy (e.g., toilet and kitchen facilities and need for major repairs) as aspects of housing need. Need was broken down by household type (single and two-parent families, childless couples and non-family households) and age of head (senior/non-senior). The senior group was composed of both home-owners and tenants; all other households in the study were tenant households.

A number of conclusions were reached from the results of the study. The most significant ones were:

- There are an estimated 75,800 tenant households and 15,500 senior homeowners needing housing assistance in Metropolitan Toronto.
- Families with children have the highest incidence and severity of need, and account for 35,000 households requiring assistance.
- Single-parent families have a much greater magnitude of need than two-parent families, although the latter has a greater incidence of need. Single-parent families in the private rental market are cutting back on basic requirements to pay for accommodation.
- There are an estimated 20,900 non-senior tenant households that need assistance but are not eligible for any low-income assisted housing programs.



"A NEW HOUSING AGENDA FOR METROPOLITAN TORONTO"

Social Planning Council of Metropolitan Toronto

March, 1984

This latest Social Planning Council report on housing is a comprehensive and detailed analysis of housing policies and programs for low and moderate-income housing in Toronto.

The report begins with an historical overview of social housing policy and programs in Metropolitan Toronto from 1945 to the present day. The discussion deals with government programs at all levels in the context of how they have influenced existing low-income housing in Toronto, concluding that recent trends demonstrate a diminishing public commitment to housing the needy.

An assessment of the need for assisted housing in Metropolitan Toronto is based upon modification of projections made by the Metropolitan Planning Department in 1983. The authors of this report maintain that estimates from the Metropolitan Toronto Assisted Housing Study underrepresented the actual numbers of persons needing assisted housing by a factor of roughly four. According to the present report a realistic estimate of those needing housing assistance in Metropolitan Toronto over the next 15 years is 110,000 households.

An evaluation of present and past federal and provincial housing programs together with estimates of need lead the authors to conclude that the most effective means of meeting need for housing is through provision of rent-geared-to-income housing in both mixed-income housing programs and small-scale public housing projects. The "new housing agenda" included recommendations:

- that senior levels of government authorize 4,500 rent-geared-to-income units annually in Metropolitan Toronto (as of March, 1984, no units have been authorized for this year).
- that senior levels of government improve the effectiveness of existing social housing programs by: a) permitting up to 50% of units in municipal non-profit buildings and other non-profit projects to be rented on an RGI basis; b) revising current methods of determining low-end of market rents in non-profit housing projects.
- that provincial and municipal grant/loan programs be established to assist in rehabilitation of physically inadequate rental accommodations.
- that shelter allowances in provincial and municipal social assistance payments be increased.
- that a certain proportion (16%) of the overall assisted housing target each year be designated for permanent housing for low-income singles.

"THE FINAL REPORT OF THE MAYOR'S ACTION TASK FORCE ON  
DISCHARGED PSYCHIATRIC PATIENTS"

Dr. Reva Gerstein, Chairperson

March, 1984

## Summary

In February 1983 Mayor Eggleton asked Dr. Reva Gerstein to chair a task force inquiring into conditions for discharged psychiatric patients living in Toronto. The objective of the task force was to identify significant problems facing discharged psychiatric patients and explore proposals for solving those problems. The final report is based on a lengthy series of consultations, including public meetings, and incorporates responses to a preliminary report released in November, 1983.

After presenting an overview of Toronto's situation with respect to discharged psychiatric patients, the report concludes that lack of appropriate, affordable housing is the number one problem facing discharged patients. Accordingly, provision of housing options is seen as the key to improving "aftercare" (post-discharge care) and reintegration into the community.

Adequate housing in and of itself does not constitute aftercare. Thus, support services must be available in conjunction with housing to enable ex-psychiatric patients to make their way in the community. The term "supportive housing" refers to a variety of housing-support service options ranging from "...24-hour supervision to weekly support and on-call supervision". In terms of housing options available to ex-psychiatric patients in Toronto, the most common residential arrangements are boarding homes (rooming, lodging houses) which do not offer support services, and group homes (residential care facilities) which involve high levels of support for residents.

Problems exist in Metropolitan Toronto with both of these alternatives. Because of local public objections to group homes and restrictive zoning in some communities, and because of the considerable financial commitment and planning required to establish a group home, there are relatively few of them in comparison with the overwhelming demand. The report recommends, therefore, that support for group homes be reaffirmed and that each municipality in Metropolitan Toronto demonstrate its commitment to the benefits of group homes by making a facility available in their community immediately for non-profit use as a group home.

Boarding houses constitute the principal source of residential accommodation for discharged psychiatric patients in the City of Toronto. The problem with boarding homes is that they are not governed by standards for personal care, and enforcement of physical standards often may lead to owners going out of business, and/or eviction of residents.

In view of the necessity for improvements in boarding homes that would take into account the needs of ex-psychiatric patient residents as well as the owner/operators of these marginal businesses, the report contains a proposal for a Contract Aftercare Project (CAP). CAP is a proposal for providing funding to boarding house owner/operators catering primarily to discharged psychiatric patients to upgrade the physical and service standards of their properties. Contracts between the municipality and boarding home owner/operators would include a provision for delivery of aftercare programs on the premises by approved social service agencies. Thus, the report recommends that an agreement be made between the Province and the City of Toronto to establish such a program, beginning in the Parkdale area. Additionally, the report recommends that an implementation committee be struck to administer the CAP, composed of representatives from Provincial, Metropolitan and City of Toronto governments, including a representative from the Medical Officer of Health and the Commissioner of Buildings and Inspections.